**CRITERIA LED DISCHARGE**

**Salisbury District Hospital**

**Croup**

Patient Label

The above patient is suitable for discharge by nursing staff according to the criteria below, providing:

* there is no deterioration in the patient’s clinical condition
* the criteria detailed below have been met
* the discharge is undertaken by a Nurse in Charge and another qualified nurse

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Criteria for Discharge** | **Criteria Met. Date & time** | **Nurse 1 initials** | **Nurse 2 initials** |
| **1** | No stridor at rest |  |  |  |
| **2** | Tolerating oral fluids |  |  |  |
| **3** | Active and alert with respiratory effort 0 -1 on PEWS and no tachycardia |  |  |  |

|  |  |
| --- | --- |
| Signed (Paediatric Cons/Paeds Registrar): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date:Time: |

**Nurse actions – please tick once completed**

|  |  |  |
| --- | --- | --- |
| Croup information leaflet given and explained |  |  |
| Discharge/ EDS completed  |  |  |
| TTOs checked and given (if applicable) |  |  |
| Family happy with Criteria Led Discharge |  |  |
| Confirm family aware of 48 hours open access |  |  |

|  |
| --- |
| I confirm the above criteria were met and the patient was discharged on \_\_\_\_\_\_\_\_\_ (Date) at\_\_\_\_\_\_\_ (Time)Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Designation: \_\_\_\_\_\_\_\_\_\_Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Designation: \_\_\_\_\_\_\_\_\_\_ |

**If there are clinical concerns such as an increasing PEWS score or if the above criteria are not met within 12 hours please contact the practitioner responsible for the patient**

**CRITERIA LED DISCHARGE**

**Salisbury District Hospital**

**Rationale**

The purpose of Criteria Led Discharge (CLD) is to facilitate safe and timely discharge from the Paediatric Unit. Each condition has standard criteria for discharge. CLD is commenced by the Paediatric/Paediatric Emergency Medicine Consultant or Paediatric middle grade doctor and completed by two nurses. This avoids delays that may be associated with medical review.

**Delegated Practitioner**

Any registered nurse with substantive contract Sarum Ward in conjunction with the nurse in charge of the ward may be given the responsibility for deciding that a patient has met the safe discharge criteria. These staff should be fully up to date with the patient’s treatment and discharge plans as discussed on admission and at handover / ward round.

**Standard Operating Procedure**

Patients suitable for CLD are identified by the senior clinician at initial assessment / handover / ward round.

The patient must have been reviewed by a Consultant in general paediatrics or Paediatric Registrar. The clinician should inform the nursing staff (including nurse in charge) that a CLD plan is appropriate for the patient. The treating clinician should inform the family that they will be on the CLD pathway.

Patients may move between the day assessment unit to the inpatient ward after commencement of the CLD pathway, within the 12 hours prior to meeting the set criteria. The CLD pathway can remain in place provided this is clearly handed over to the nursing staff taking over the patient’s care, and the pathway is followed. I.e. a move in wards does not necessitate a medical review.

Clinicians will complete and sign the discharge information summary highlighting that they are on the CLD pathway and prescribe any medications to take home (TTOs). Upon meeting discharge criteria, the discharge letter can be given to parents/carer’s by nursing staff.

At the time a patient is ready for discharge nursing staff ensure all necessary actions have been taken including:

• there has been no deterioration in the patient’s clinical condition

• the specified criteria for discharge are met

• all other discharge arrangements are in place

• the discharge information summary is completed and signed

• the ward book is completed with patient’s name in the CLD box

The two nurses then sign the relevant section of the CLD form.

The patient is discharged home with appropriate patient information leaflet and consideration of GP follow up. All CLD patients have 48 hours open access to DAU.

**If there are clinical concerns such as an increasing PEWS score or if the above criteria are not met within 12 hours please contact the practitioner responsible for the patient**

**GP letter minimum guidance notes**.Commenced on Criteria Led Discharge, observed and discharged once stridor and respiratory distress settled. Tolerating oral fluids. Discharged with croup advice.